Entity Name: Bayouland Library System

Address: 301 W. Congress Street, Lafayette, LA 70501

Telephone: 337-261-5781 Email: danny.gillane@lafayettepubliclibrary.org

This annual sworn financial statement is required to be filed with the Legislative Auditor within 90 days of the end of the entity's fiscal year by sending a pdf copy by email to ereports@lla.la.gov, faxing to 225-339-3986, or mailing to Louisiana Legislative Auditor — Local Government Services, P.O. Box 94397, Baton Rouge, LA 70804-9397.

AFFIDAVIT

Personally came and appeared before the undersigned authority, <u>Danny Gillane</u> (officer's name), who, duly sworn, deposes and says that the financial statements herewith given present fairly, in all material respects, the financial position of <u>Bayouland Library System</u> (entity's name) as of <u>December 31, 2021</u> (entity's year-end) and the results of operations for the year then ended, in accordance with the basis of accounting described within the accompanying financial statements; that the entity has maintained a system of internal control structure sufficient to safeguard assets and comply with laws and regulations; and that the entity has complied with all laws and regulations, except as follows: <u>n/a.</u>

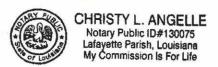
<u>Complete if Applicable:</u> In addition, <u>Danny Gillane</u> (officer's name), who duly sworn, deposes, and says that <u>Bayouland Library System</u> (entity's name) received \$75,000 or less in revenues and other sources for the year ended <u>December 31, 2021</u> (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

OFFICER'S SIGNATURE

Director
OFFICER'S TITLE

Sworn to and subscribed before me, this 25 day of May Ch , 20 22

NOTARY PUBLIC SIGNATURE & SEAL



General Fund		Other Fund Tota		Total	
RECEIPTS (Provide Brief Description):		_	_	22	
I. Interest	\$	7	\$	_ \$	7
2. Membership	SA:	1,600	m		1,600
3. 4.	77		<u> </u>	- %	277
5.	w 				
6. Total receipts (add lines 1 - 5)	\$	1,607	S	\$	1,607
DISBURSEMENTS (Provide Brief Description):					
DISBURSEMENTS (Provide Brief Description): 7. Bank Charges 3.	\$ 	38	\$	\$ 	38
DISBURSEMENTS (Provide Brief Description): 7. Bank Charges 8. 9.		38	\$	\$	38
DISBURSEMENTS (Provide Brief Description): 7. Bank Charges 8. 9. 10.		38	\$	\$	38
DISBURSEMENTS (Provide Brief Description): 7. Bank Charges 8. 9.		38	\$	\$	
DISBURSEMENTS (Provide Brief Description): 7. Bank Charges 8. 9. 10. 11.	\$ 			\$ \$	38
DISBURSEMENTS (Provide Brief Description): 7. Bank Charges 3. 9. 10. 11. 12. 13. Total Disbursements (add lines 7 - 12)	\$ 	38	\$		38 1,569 79,837

NOTE: If the entity receives any funds from pre- or post-adjudication court costs, fines, and/or fees, the entity must use one or more of the following categories in the receipts description fields: Civil Fees; Bond Fees; Asset Forfeiture/Sale; Pre-Trial Diversion Program; Criminal Court Costs/Fees; Criminal Contempt Fines; Other Criminal Fines; Restitution; and Probation/Parole/Supervision Fees.

Identify the Basis of Accounting, if not using Cash-Basis:

Balance Sheet				Statement B
45	_	General Fund	Other Fund	Total
ASSETS (balances at year-end)				
Cash and cash equivalents	\$	81,406	\$	\$ 81,406
2. Investments (fair value)	Vali	30		
3. Office furnishings (Cost of desks, etc)			2 22	
4. Equipment (Cost of fax machine, etc)				
5. Other (brief description)				
6. Total Assets (add lines 1 - 5)	\$	81,406	\$	\$ 81,406
LIABILITIES AND FUND BALANCE (at year-end):				
7. Liabilities (brief description):	\$		\$	\$
8. 9.				
9.			4	8
10.		211	17 W 45400	
11. Total Liabilities (add lines 7 - 10)	201000000000000000000000000000000000000	20.000		
12. Fund balance (amount from Line 16 on Statement A)		81,406	W 2	81,406
13. Other	100		9.7 3.5	0.27
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$	81,406	\$	\$ 81,406

Bayouland Library System

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Danny Gillane, Director of Lafayette Public Library System (Bayouland Library Headquaters)

Purpose	Dollar Amount
1. Salary	1. \$0
2. Benefits-insurance	2. \$0
3. Benefits-retirement	3. \$0
4. Benefits-other (describe)	4. \$0
5. Benefits-other (describe)	5. \$0
6. Benefits-other (describe)	6. \$0
7. Car allowance	7. \$0
8. Vehicle provided by government (if reported on your W-2)	8. \$0
9. Per diem	9. \$0
10. Reimbursements	10. \$0
11. Travel	11. \$0
12. Registration fees	12. \$0
13. Conference travel	13. \$0
14. Housing	14. \$0
15. Unvouchered expenses (example: travel advances, etc.)	15. \$0
16. Special meals	16. \$0
17. Other	17. \$0
18. TOTAL (enter total of line 1-17)	18. \$0

_X___ Please check here if the Agency Head does not receive any compensation, benefits, and other payments. (Act 462 of the 2015 Legislative Session allows nongovernmental entities or not-for-profit (quasi-public) entities to report on the Act 706 schedule **only** those payments to the agency head that are derived from the public funds.)